

EMPLOYER'S RETURN OF
INCOME TAX WITHHELD

K-1

NAME AND ADDRESS		AMENDED RETURN Period Beginning: <input type="text"/> Period Ending: Return Due: Account No.:		FOR OFFICIAL USE ONLY			
				A As Originally Reported or Adjusted		B Correct Amount	
A As Originally Reported or Adjusted		B Correct Amount		1. Total wages paid this period			
Total Number of Employees This Period				2. Kentucky income tax withheld this period			
<input type="text"/>		<input type="text"/>		3. Previous period adjustments or credits			
EXPLANATION OF CHANGES				4. Net tax due			
				5. Penalty (see instructions)			
				6. Interest (see instructions)			
				7. Total penalty and interest (line 5 plus line 6)			
				8. Total amount due (line 4 plus line 7)			
				Refund requested \$ _____			
				I declare, under the penalties of perjury, that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.			
				SIGN HERE ► _____ SIGNATURE TITLE DATE			
				Remit total amount due. Make check payable to: Kentucky State Treasurer. Mail to: Revenue Cabinet, Frankfort, Kentucky 40619.			

